

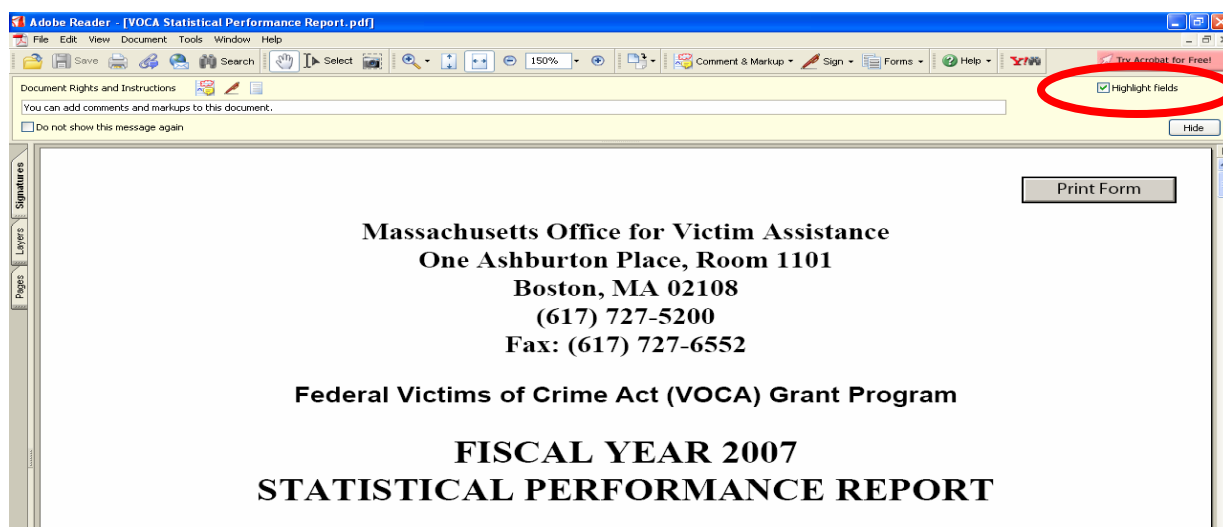
PDF VOCA Statistical Performance Report Instructions

Before you start:

1. If you do not have Adobe Reader it can be downloaded for free at:
<http://www.adobe.com/products/acrobat/readstep2.html>

You do not need to download Adobe Photoshop® Album Starter Edition; you may uncheck this option to avoid an unnecessary download.

2. Please note if you have Adobe Standard or Adobe Professional you do not need to download Adobe Reader.
3. When opening the document you should see:



At the top of the document you will have the option to turn on (select) "Highlight fields". Please check this box.

Saving and Printing:

1. Saving changes; each time you attempt to close the form it will ask if you would like to "save changes" if this is not selected any changes you make will be lost.
2. To print a hard copy (or a blank hard copy). At the top of the form you will see a "Print" button. This will print a hard copy of the form for fax submittal or for your records.
3. When saving you may also rename the form by selecting "Save As..." from your file menu. Renaming the form will allow you to save multiple versions of the document for example "Q1", "Q2", etc.

Navigating and completing the form:

1. The document is formatted to allow you to navigate the required fields in two ways. The fields that allow response will be highlighted (if that option is selected). You may tab from cell to cell or use your mouse to select the intended cell.
2. "0" is not required if there are no numbers to report for a specific category they may be left blank.

Cover Page – Fill-in, or “check” each line as requested.

Section 1 – Indicate the number of New and Ongoing clients in the appropriate boxes.

Section 2 – Indicate the number of Victims Served in the appropriate boxes. For #15 there are several drop-down options. If the most appropriate response is not listed, you may type in a new type of service.

Section 3 - Indicate the number of Referrals provided or received in the appropriate boxes. #20, if needed type in the Source/Agency (if not indicated in 1 – 19).

Section 4 – Indicate the number of Victims Served by Type of Crime. #17, if needed indicate the Type of Crime (if not indicated in 1 – 16).

Section 5 – Indicate the number of clients based on each Civil Rights Compliance question. In Section 5(D) you may add “Other” Race/Ethnicities not indicated on this form.

Section 6 – Briefly state the Content of Training Received and the number of hours for each event. In 6(B) there are several dropdown choices available for Outreach. If an applicable choice is not listed you may type in the applicable label.

Section 7 – Only complete if there have been changes that have affected the service delivery numbers you have proposed in your approved Time Tables. You may type directly into the field or cut and paste from word. However you are limited to the visible space. If there has been no change please check the provided box.

Section 8 – Please provide feedback based on the indicated questions. VOCA funded programs must respond at least once during the fiscal year. You may type directly into the field or cut and paste from word. However you are limited to the visible space. If you are choosing not to respond please check the box provided (only if leaving completely blank).

Submitting and Filing:

1. At the top of the form you will see a “Print” button. This will print a hard copy of the form for fax submittal or for your records.
2. Saving changes; each time you attempt to close the form it will ask if you would like to “save changes” if this is not selected any changes you make will be lost.
3. Once you have saved the final version it can be sent as an attachment via e-mail to Daniel.cooper@state.ma.us or faxed to 617-727-6552. E-mail is preferred.